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APPLICANTS

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ref.
 ** CONTINUING DATA *****
 This appln claims benefit of 60/210,652 06/09/2000
 and claims benefit of 60/261,922 01/16/2001
 and claims benefit of 60/261,121 01/12/2001

ref.
 ** FOREIGN APPLICATIONS *****
 SWEDEN 0001253-4 04/05/2000
 SWEDEN 0003195-5 09/07/2000
 SWEDEN 0004157-7 11/13/2000

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 05/30/2001

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY SWEDEN	SHEETS DRAWING 5	TOTAL CLAIMS <u>34</u> 32	INDEPENDENT CLAIMS 2
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35 USC 119 (a-d) conditions met
☒ yes ☐ no ☐ Met after Allowance

Verified and Acknowledged
 Examiner's Signature *ref.* Initials *ref.*

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 2292
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TITLE
 Method and system for information association

<p>FILING FEE RECEIVED 1092</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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